

Interested parties may obtain a copy of the solicitation by writing to Ms. Patricia Walker at the address indicated in the **FOR FURTHER INFORMATION CONTACT** paragraph.

Dated: August 3, 1998.

Allan J. Zaic,

Assistant Commissioner, Office of Transportation and Property Management.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Meeting of the Advisory Committee on Blood Safety and Availability

AGENCY: Office of the Secretary.

ACTION: Revised notice of meeting.

The Advisory Committee on Blood Safety and Availability will meet on August 27, 1998, from 8:00 a.m. to 5:00 p.m. and on August 28, 1998 from 8:00 a.m. to 3:00 p.m. The meeting will take place in the Ticonderoga Room of the Hyatt Regency Hotel on Capitol Hill, 400 New Jersey, N.W., Washington, D.C. 20001. The meeting will be entirely open to the public.

The agenda of this meeting has been revised as follows: on August 27, 1998 the Committee will consider potential barriers to the evolution from human- to recombinant-based blood products. The focus of this discussion will be on blood products used by patients with bleeding disorders. The discussion will be limited to this topic so that the Committee can discuss, on August 28, 1998 what, if any, additional recommendations it may wish to make regarding the transmissible spongiform encephalopathies and blood safety.

Public comment on the first topic will be solicited at or about 1:00 p.m. on August 28, 1998; public comment on the second topic will be solicited at or about

11:00 a.m. on August 28, 1998. Public comment will be limited to three minutes per speaker. Those who wish to have printed material distributed to Advisory Committee members should submit thirty (30) copies to the Executive Secretary prior to close of business August 14, 1998.

FOR FURTHER INFORMATION CONTACT:

Stephen D. Nightingale, M.D., Executive Secretary, Advisory Committee on Blood Safety and Availability, Office of Public Health and Safety, Department of Health and Human Services, 200 Independence Avenue S.W., Washington, D.C. 20201. Phone (202) 690-5560 FAX (202) 690-6584 e-mail SNIGHTIN@osophs.dhhs.gov.

Dated: July 27, 1998.

Stephen D. Nightingale,

Executive Secretary, Advisory Committee on Blood Safety and Availability.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Early Head Start Evaluation.

OMB No: 0970-0143.

Description: The Head Start Reauthorization Act of 1994 established a special initiative creating funding for services for families with infants and toddlers. In response the Administration on Children, Youth and Families (ACYF) designed the Early Head Start (EHS) program. In September 1995, ACYF awarded grants to 68 local programs to serve families with infants and toddlers. ACYF has subsequently awarded grants to an additional 107 local programs, for a total of 175 EHS programs.

EHS programs are designed to produce outcomes in four domains: (1) child development, (2) family development, (3) staff development, and (4) community development. The Reauthorization required that this new initiative be evaluated. To study the effect of the initiative, ACYF awarded a contract through a competitive procurement to Mathematical Policy Research, Inc. (MPR) with a subcontract to Columbia University's Center for Young Children and Families. The evaluation will be carried out from October 1, 1995 through September 30, 2000. Data collection activities that are the subject of this Federal Register notice are intended for the third and final phase of the EHS evaluation.

The sample for the child and family assessments will be approximately 3,000 families who include a pregnant woman or a child under 12 months of age, in 17 EHS study sites. Each family will be randomly assigned to a treatment group or a control group. The sample for the child care assessments will include the primary child care provider for the focal child in each of the 3,000 study sample families. The surveys and assessments will be conducted through computer-assisted telephone and personal interviewing, pencil and paper self-administered questionnaires, structured observations and videotaping. All data collection instruments have been designed to minimize the burden on respondents by minimizing interviewing and assessment time. Participation in the study is voluntary and confidential.

The information will be used by government managers, Congress and others to identify the features and evaluate the effectiveness of the EHS program.

Respondents: Applicants to the Early Head Start program and child care providers for Early Head Start families and control group families.

Annual Burden Estimates:

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
36-Month Parent Interview, Child Assessment, and Videotaping Protocol	576	1	2.0	1,152
Child Care Provider Interview:				
Child Care Centers—				
Center Directors	161	1	.25	40
Direct Provider	161	1	.17	27
Classroom Staff	161	1	.17	27
Family Child Care Providers	40	1	.5	20
Family Provider Assistants	9	1	.17	1
Relative Care Providers	113	1	.5	57
Relative Provider Assistants	25	1	.17	4
Child Care Provider Observation Protocol:				
Child Care Centers—				
Family Child Care Providers	161	1	2	321
Relative Care Providers	40	1	2	79